

State of South Carolina

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Workers' Compensation Commission

TO: Narcotics Use Advisory Committee

FROM: Gary M. Cannon

DATE: February 27, 2015

RE: PDAC State Plan Recommendations

Chairman Davis asked me to provide you with the following summary of select recommendations from the State Plan to Prevent and Treat Drug Abuse, published by the Governor's Prescription Drug Abuse Council in December 2014 (p. 49-56).

PRIORITY AREA: PRESCRIBERS

Recommendation: Recommend that the Medical Board, the South Carolina Department of Health and Environmental Control, and other stakeholders work together to create a suggested list of topics for the education providers to include in the mandated training.

Recommendation: Recommend extending the education mandate contained in Act 244 to dentists, physician assistants, and advanced practice nurses with prescriptive authority.

Recommendation: Recommends working with schools to increase course offerings related to this topic or make it a mandatory part of the curriculum.

Recommendation: Recommend that all prescribers to be familiar with the Revised Pain Management Guidelines contained in Appendix A of the Report of the PRESCRIPTION DRUG ABUSE PREVENTION COUNCIL and to conform their prescribing practice to these Revised Guidelines.

Recommendation: Recommend that prescribers be knowledgeable about all state and federal laws and regulations regarding controlled substances.

Recommendation: Recommend that registration and utilization of SCRIPTS be considered mandatory for prescribers to provide safe, adequate pain management.

Recommendation: Recommends that prescribers who prescribe chronic opioid therapy be familiar with treatment options for opioid addiction, including those available in licensed opioid treatment programs and those offered by an appropriately credentialed and experienced physician through office-based opioid treatment, so as to make appropriate referrals when needed.

Recommendation: Recommend that prescribers treating patients with controlled substances consider prescribing Naloxone when clinically indicated.

Recommendation: Recommend that the Boards of Medical Examiners, Dentistry, and Nursing to continue to update the Revised Pain Management Guidelines as lessons are learned and when data suggests that changes are needed.

Recommendation: SCRIPTS must be as user friendly as possible to facilitate easy use.

Recommendation: The Bureau of Drug Control (BDC) and Boards have a shared interest in correcting improper prescribing behaviors, through education when possible and enforcement when necessary. Upon establishment of criteria by the Board of Medical Examiners, which may include, but are not limited to, a daily MED threshold and prescription volume by prescriber, SCRIPTS shall generate reports by which outlier prescribers will be identified for further review by the BDC and, if necessary, referral to LLR for initiation of the complaint process.

Recommendation: Based on the Revised Guidelines, recognize that patients requiring more than 80 MED present an increased risk of death from respiratory depression. Accordingly, recommends that, when capable, SCRIPTS offer an MED calculator that can generate an alert for each patient whose record is accessed and for which the MED exceeds 80 MED. The MED calculator and alert function will provide an additional tool for the prescriber to utilize when assessing a patient's prescriptive needs. This threshold is not a substitute for a prescriber's clinical judgment, but merely one factor for consideration in the prescribing process.

Recommendation: The BDC shall utilize the full analytical capabilities of SCRIPTS to identify prescribers engaged in questionable prescribing activities.

Recommendation: Information shared between LLR and DHEC may be used to assist the BDC in promptly identifying a prescriber's area of specialization, if applicable, when investigating a licensee's prescribing behavior.

Recommendation: Support the compilation and distribution of report cards to all South Carolina licensed prescribers so that each prescriber can see how his or her prescribing patterns compare to other prescribers practicing in the same or similar clinical setting.